

Haleakalā Soundscape Audio Recording Evaluation

2007

ID: _____

Location: _____

Date: _____

Time: _____AM / PM

Version: Air Ground

A. Trip Description

- 1. How many people are in your personal group (family/friends) today?**

Group size: _____

- 2. Is your personal group part of a commercial tour in the park today? (Check one.)**

☐ Yes

☐ No

- 3. Have you ever visited Haleakalā National Park before? (Check one.)**

☐ Yes (CONTINUE TO QUESTION 4)

☐ No (SKIP TO QUESTION 5)

- 4. Approximately how many times have you visited Haleakalā National Park before today?**

Approximate number of visits: _____ **OR** Don't know/Not sure

5. Please rate the importance of each of the following reasons for hiking in Haleakala National Park today. (Circle one number for each item.)

	Not at all important	Somewhat important	Very important
a. Seeing the Bamboo Forest	1	2	3
b. Seeing Waimoku	1	2	3
c. Enjoying peace and quiet	1	2	3
d. Being with family/friends	1	2	3
e. Getting away from crowds in the O'heo Pools Area	1	2	3
f. Getting exercise	1	2	3
g. Experiencing nature "up-close", away from park facilities	1	2	3
h. Appreciating the natural scenery	1	2	3
i. Hearing the sounds of nature	1	2	3
j. Learning about Hawaiian culture and history	1	2	3

**FOR THE NEXT SET OF QUESTIONS, PLEASE ASK THE SURVEY
ATTENDANT FOR ASSISTANCE.**

B. The Park Soundscape

6. We would like you to listen to several short recordings of sounds from this part of Haleakalā National Park. Please rate each recording by indicating how acceptable you would find the sounds heard in the audio clip during a hike in this area of the park. (Circle one number for each recording.)

Very	Recording 1										Very
Unacceptable											Acceptable
-4	-3	-2	-1	0	+1	+2	+3	+4			

A. Briefly describe any sounds in Recording 1 you found pleasing.

OR ☐ I did not find any of the sounds in Recording 1 to be pleasing.

B. Briefly describe any sounds in Recording 1 you found annoying.

OR ☐ I did not find any of the sounds in Recording 1 to be annoying.

PRESS PLAY AND RESUME YOUR LISTENING SESSION.

Very Unacceptable		Recording 2								Very Acceptable	
-4	-3	-2	-1	0	+1	+2	+3	+4			

A. Briefly describe any sounds in Recording 2 you found pleasing.

OR ☐ I did not find any of the sounds in Recording 2 to be pleasing.

B. Briefly describe any sounds in Recording 2 you found annoying.

OR ☐ I did not find any of the sounds in Recording 2 to be annoying.

ADVANCE YOUR PLAYER AND RESUME YOUR LISTENING SESSION.

Very Unacceptable		Recording 3							Very Acceptable	
-4	-3	-2	-1	0	+1	+2	+3	+4		

A. Briefly describe any sounds in Recording 3 you found pleasing.

OR ☐ I did not find any of the sounds in Recording 3 to be pleasing.

B. Briefly describe any sounds in Recording 3 you found annoying.

OR ☐ I did not find any of the sounds in Recording 3 to be annoying.

ADVANCE YOUR PLAYER AND RESUME YOUR LISTENING SESSION.

Very Unacceptable		Recording 4								Very Acceptable	
-4	-3	-2	-1	0	+1	+2	+3	+4			

A. Briefly describe any sounds in Recording 4 you found pleasing.

OR ☐ I did not find any of the sounds in Recording 4 to be pleasing.

B. Briefly describe any sounds in Recording 4 you found annoying.

OR ☐ I did not find any of the sounds in Recording 4 to be annoying.

ADVANCE YOUR PLAYER AND RESUME YOUR LISTENING SESSION.

Very Unacceptable		Recording 5								Very Acceptable	
-4	-3	-2	-1	0	+1	+2	+3	+4			

A. Briefly describe any sounds in Recording 5 you found pleasing.

OR ☐ I did not find any of the sounds in Recording 5 to be pleasing.

B. Briefly describe any sounds in Recording 5 you found annoying.

OR ☐ I did not find any of the sounds in Recording 5 to be annoying.

<p>YOU HAVE COMPLETED THIS PORTION OF YOUR LISTENING SESSION. CONTINUE TO THE NEXT PAGE.</p>

7. Which of the five recordings you just heard sounds most like what you heard while hiking in the park today? (Check one.)

- ☐ Recording 1
- ☐ Recording 2
- ☐ Recording 3
- ☐ Recording 4
- ☐ Recording 5

**For the next question,
please ask the survey attendant for assistance.**

8. We would like to know how often you think it would be acceptable to hear a helicopter air tour while hiking in the park. To help judge this, please listen to a short recording of a helicopter air tour and then rate the acceptability of each of the following scenarios based on how frequently you would hear the sounds in the recording. (Circle one number for each scenario.)

Hear the helicopter sounds once...	Very Unacceptable							Very Acceptable	
Every 5 minutes	-4	-3	-2	-1	0	+1	+2	+3	+4
Every 15 minutes	-4	-3	-2	-1	0	+1	+2	+3	+4
Every 30 minutes	-4	-3	-2	-1	0	+1	+2	+3	+4
Every 60 minutes	-4	-3	-2	-1	0	+1	+2	+3	+4
Never hear the sounds	-4	-3	-2	-1	0	+1	+2	+3	+4

9. **Did you hear any aircraft while you were hiking in this area of the park today? (Check one.)**
- ☐ Yes (CONTINUE TO QUESTION 10)
 - ☐ No (SKIP TO QUESTION 11)
10. **Please indicate how pleasing or annoying you found the sounds of aircraft you heard while you were on the trail today. (Check one.)**
- ☐ Very pleasing
 - ☐ Somewhat pleasing
 - ☐ Neutral
 - ☐ Somewhat annoying
 - ☐ Very annoying
11. **Have you ever taken a scenic air tour over Haleakalā National Park or any other national park? (Check all that apply.)**
- ☐ Yes, I have taken a scenic air tour over Haleakalā National Park
 - ☐ Yes, I have taken a scenic air tour over another national park
 - ☐ No, I have never taken a scenic air tour over a national park
12. **If given the opportunity to take a scenic air tour over Haleakalā National Park, would you do so even if visitors in the park could hear the aircraft while hiking? (Check one.)**
- ☐ Yes
 - ☐ No
 - ☐ Don't know/not sure

- 13. Please indicate the extent to which you would support or oppose each of the following potential management actions at Haleakalā National Park. (Check one box for each item.)**

	Strongly Support	Support	Neither Support nor Oppose	Oppose	Strongly Oppose	Don't Know/ Not Sure
Reduce the number of scenic air tours allowed to fly over the park.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DK
Maintain the number of scenic air tours allowed to fly over the park at the current level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DK
Increase the number of scenic air tours allowed to fly over the park.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DK
Require scenic air tours to be flown over the park only during specially designated dates and times.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DK
Require scenic air tours to use designated flight paths over limited areas of the park.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DK
Prohibit scenic air tours from flying over the park.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DK

C. Background Information

- 14. What is your gender? (Check one.)**
Male
Female
- 15. In what year were you born?**
Year born: _____
- 16. Do you live in the United States? (Check one.)**
Yes (What is your zip code? _____)
No (What country do you live in? _____)
- 17. What is the highest level of formal education you have completed? (Check one.)**
Some high school
High school graduate or GED
Some college, business or trade school
College, business or trade school graduate
Some graduate school
Master's, doctoral or professional degree
- 18. Are you Hispanic or Latino? (Check one.)**
Yes
No
- 19. What is your race? (Check all that apply.)**
American Indian or Alaska Native
Asian
Black or African American
Native Hawaiian
Pacific Islander other than Native Hawaiian
White

Thank you for your help with this survey!
Please return the completed questionnaire to the survey administrator.

PRIVACY ACT and PAPERWORK REDUCTION ACT statement: 16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. The permanent data will be anonymous. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. BURDEN ESTIMATE statement: Public reporting burden for this form is estimated to average 15 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to

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